## CONDOMINIUM ASSOCIATION INFORMATION UPDATE FORM

All information provided is public information. Changes are to be made by an officer of the condominium association. Please use a typewriter or print legibly in black ink. Submit completed form to: DCCA -- P&VLD Real Estate Commission 335 Merchant Street, Room 333 Honolulu, HI 96813 Name of Condominium Association: \_\_Mott-Smith Laniloa 09/01/2013 The information provided on this form is current as of and replaces the information previously provided to the Real Estate Commission ("Commission"). Please indicate the change being reported: [ ] Names and positions of the officers of the association (President, Secretary and Treasurer required): John Granito - President Teddi Anderson - VP Celia Khim - Secretary Christopher Gaines - Treasurer [ ] Designated officer of the association who can be contacted directly: Title: President Name: John Granito 47-635 Uakea Place, Kaneohe, Hawaii 96744 Officer's Public Mailing Address: [ x] Management status: (Check ONE only and fill in corresponding information) [ ] Self-managed by the Association of Apartment Owners (AOAO) Name of manager: Telephone No.: Title: \_ kkManaged by Condominium Managing Agent Certified Management, Inc. dba Associa Hawaii CMA Reg. No.: Name: Candace Villarmia, Executive Corp Assistant 737 Bishop Street, Ste 3100, Hnl 96813 808 836-0911 Telephone No.: Address: \_\_\_ I ] Contact designation (individual) to receive all AOAO correspondence (except bulletins) and telephone calls from the Commission: (If different from above) same as above Title: Telephone No.: Mailing Address: I certify that I am authorized to sign this form on behalf of this condominium association, and that the information provided is true and correct. Signature of association officer, developer or 100% sole owner of condominium project May 6, 2014 John Granito Date Print Name

Check one only:

[\*\*] President [ ] Vice-President [ ] Secretary [ ] Treasurer

[ ] Developer or Developer's Agent registering for unorganized association

[ ] 100% Sole Owner of Condominium Project

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Submit completed form to: DCCA – P&VLD Real Estate Commission 335 Merchant Street, Room 333

Honolulu, HI 96813

Name of Condominium Association:	Mott Smith	Lanil	oa ·				
The information provided on this form previously provided to the Real Estate	/29/20 nission").	14	and repla	d replaces the information			
Please indicate the change being repo	rted:		•				
☐ Names and positions of the officers of	of the association (Presi	ident, Secr	etary and Tre	easurer required	i):		
<del></del>						The state of the s	
Designated officer of the association	who can be contacted	directly:	:	STA	4	A CONTRACTOR	
Name:		Title:	***	<u> </u>	<u>}</u>	N m	
Officer's Public Address:			in the second se	<b>考罗</b> 多	տ		
☐ Management status: (Check ONE or ☐ Self-managed by the Associ		AOUO)	nation)	AFFAIR	PIZ :25	BRANCH	
Title:							
Managed by Condominium I		_ `				···	
			R	B Lic. No.:			
Contact Person:		······································					
				elephone No.:			
Contact designation (individual) to recommission: (if different from above	ceive ail AOUO corresp			ns) and telepho	one calls t	rom the	
Name:	====		тт	itle:			
Mailing Address:			Те	lephone No.:			
Individual responsible for policy to pro	ovide reasonable acces rson, resider			to serve civil p	rocess:		
I certify that I am authorized to sign this provided is true and correct.  Signature of association	is form on behalf of the					ormation	
Check one only:	Pane			5/24/201 Date			
	Secretary Treas stering for unorganized		n				